FORM 1120B-ES/ME

MAINE ESTIMATED TAX PAYMENTVOUCHERFOR

TIMATED TAX OUCHERFOR FINANCIAL INSTITUTIONS

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VOUCHER 1 - Due April 17 (15th day of the fourth month for fiscal year taxpayers)

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l	Enter beginning and ending dates for the entire tax year (NOT the quarter dates)	If this payment is for a short year period, enter the next filing period below
	/ to/	/ to / /
	Financial Institution Name	\$,,00
	Address	Federal Identification Number
	City, Town, or Post Office	State ZIP Code Date Installment Due

Detach this voucher and make check payable to TREASURER STATE OF MAINE. Mail both to: Maine Revenue Services, P.O. Box 1062, Augusta, ME 04332-1062

Rev. 12/06

2007

FORM 1120B-ES/ME

MAINE ESTIMATED TAX PAYMENTVOUCHERFOR FINANCIAL INSTITUTIONS

VOUCHER 2 - Due June 15 (15th day of the sixth month for fiscal year taxpayers)

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	Enter beginning and ending dates for the entire tax year (NOT the quarter dates) If this payment is for a short year period, enter the next filing period below
	/ to/
	Financial Institution Name \$
	Address Federal Identification Number
	City, Town, or Post Office State ZIP Code Date Installment Due

Detach this voucher and make check payable to TREASURER STATE OF MAINE. Mail both to: Maine Revenue Services, P.O. Box 1062, Augusta, ME 04332-1062

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MAINE ESTIMATED TAX PAYMENTVOUCHERFOR FINANCIAL INSTITUTIONS

VOUCHER 3 - Due September 17 (15th day of the ninth month for fiscal year taxpayers)

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Γ	Enter beginning and ending dates for the entire tax year (NOT the quarter dates)	this payment is for a short year period, enter the next filing period below
	/ to/	/ to//
	Financial Institution Name	\$,00
	Address	Federal Identification Number
L	City, Town, or Post Office State	ZIP Code Date Installment Due
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MAINE ESTIMATED TAX PAYMENTVOUCHERFOR FINANCIAL INSTITUTIONS

VOUCHER 4 - Due December 17 (15th day of the twelfth month for fiscal year taxpayers)

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Γ	Enter beginning and ending dates for the entire tax year (NOT the quarter dates)	If this payment is for a short year period, enter the next filing period below
	/ / to / /	/ to / /
	Financial Institution Name	\$,,00
	Address	Federal Identification Number
	City, Town, or Post Office	State ZIP Code Date Installment Due

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